APPLICATION NUMBER: _09/435034_

Total Fee Calculation

	Fee Code Sm./Lg.	Total # Claims	Number Extra	X	Fee Sm. Entity	Fee Lg. Entity	=	Total
Basic Filing Fee	201/101					✓	=	760
Total Claims >20	203/103	35	-20 = 15	x	___	___	=	270
Independent Claims >3	202/102	16	-3 = 13	x	___	___	=	1014
Mult. Dep Claim Present	204/104				___	___	=	260
Surcharge	205/105				___	___	=	
English Translation	139				___	___	=	

TOTAL FEE CALCULATION

2304

Fees due upon filing the application:

Total Filing Fees Due = $ ___2304___

Less Filing Fees Submitted - $ ___2326___ + $ 40.00
→ Assig. paid also

BALANCE DUE = $ ___$18.00___   for Claim unpaid

signature
Office of Initial Patent Examination

FORM OIPE-RAM-01 (Rev. 12/97)

PATENT APPLICATION FEE DETERMINATION RECORD Effective November 10, 1998	Application or Docket Number

CLAIMS AS FILED - PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	35 minus 20=	* 15
INDEPENDENT CLAIMS	16 minus 3 =	* 13
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	380.00	OR		760.00
X$ 9=		OR	X$18=	270
X39=		OR	X78=	1014
+130=		OR	+260=	260
TOTAL		OR	TOTAL	2304

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
    The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.